

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 25, 2002 8:00 am
Secretary of State

07-25-2002 90127 006 ***550.00

DOCUMENT # 841743

1. Entity Name

NORTHROP GRUMMAN INFORMATION TECHNOLOGY, INC.

Principal Place of Business

**2411 DULLEN CORNER PARK
 SUITE 800
 SAN PEDRO CA 90731
 US**

Mailing Address

**2411 DULLEN CORNER PARK
 SUITE 800
 SAN PEDRO CA 90731
 US**

2. Principal Place of Business

2411 DULLES Corner Park

3. Mailing Address

2411 DULLES Corner Park

Suite, Apt. #, etc.

Suite 800

Suite, Apt. #, etc.

Suite 800

City & State

HERNDON VA

City & State

HERNDON VA

Zip

20171

Country

USA

Zip

20171

Country

USA

4. FEI Number

95-2126773

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00
 After September 13, 2002 Fee will be \$750.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
 NAME **ANDERSON, HERBERT W**
 STREET ADDRESS **2411 DULES CORNER PARK #800**
 CITY-ST-ZIP **HERNDON VA 20171**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **V** ☐ Delete
 NAME **MOVIUS, STEPHEN C**
 STREET ADDRESS **2411 DULLES CORNER PARK #8**
 CITY-ST-ZIP **HERNDON VA 20171**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **S** ☐ Delete
 NAME **MULLAN, JOHN H**
 STREET ADDRESS **1840 CENTURY PARK EAST**
 CITY-ST-ZIP **LOS ANGELES CA 90067**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **V** ☐ Delete
 NAME **NILS, ERICSON**
 STREET ADDRESS **2100 WASHINGTON BLVD**
 CITY-ST-ZIP **ARLINGTON VA 22204**

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **2411 Dulles corner park**
 CITY-ST-ZIP **HERNDON, VA 20171**

TITLE **V** ☐ Delete
 NAME **PERIELLO, JAMES**
 STREET ADDRESS **8110 GATEHOUSE ROAD ST**
 CITY-ST-ZIP **FALLS CHURCH VA 22042**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **V** ☐ Delete
 NAME **CLARK, MARTIN F**
 STREET ADDRESS **2411 DULLES CORNER**
 CITY-ST-ZIP **LOS ANGELES CA 90067**

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP **HERNDON, VA 20171**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **X STEPHEN MOVIUS**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/24/02

(703) 713-4000

Date

Daytime Phone #

CR2E034 (4/02)